

"(4) BENEFITS NOT SUBJECT TO REQUIREMENTS IF OFFERED

AS SEPARATE INSURANCE POLICY.—Medicare supplemental

health insurance (as defined under section 1882(a)(1) of the

Social Security Act), coverage supplemental to the coverage

provided under chapter 55 of title 10, United States Code,

and similar supplemental coverage provided to coverage under

a group health plan.

"(d) OTHER DEFINITIONS.—For purposes of this chapter—

"(1) COBRA CONTINUATION PROVISION.—The term COBRA

continuation provision means any of the following:

"(A) Section 4980B, other than subsection (f)(1) thereof insofar as it relates to pediatric vaccines.

"(B) Part 6 of subtitle B of title I of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1161 et seq.), other than section 609 of such Act.

"(C) Title XXII of the Public Health Service Act.

"(2) GOVERNMENTAL PLAN.—The term governmental

plan has the meaning given such term by section 414(d).

"(3) MEDICAL CARE.—The term medical care has the

meaning given such term by section 213(d) determined without

regard to—

"(A) paragraph (1)(C) thereof, and

"(B) so much of paragraph (1)(D) thereof as relates to qualified long-term care insurance.

"(4) NETWORK PLAN.—The term network plan

means health insurance coverage of a health insurance issuer

under which the financing and delivery of medical care are provided,

in whole or in part, through a defined set of providers under

contract with the issuer.

"(5) PLACED FOR ADOPTION DEFINED.—The term placement

or being placed for adoption, in connection with any placement

for adoption of a child with any person, means the assumption

and retention by such person of a legal obligation for total

or partial support of such child in anticipation of adoption

of such child. The child's placement with such person terminates upon the termination of such legal

obligation.

#### SEC. 9806. REGULATIONS.

"The Secretary, consistent with section 104 of the Health

Portability and Accountability Act of 1996, may promulgate

such regulations as may be necessary or appropriate to carry out the

provisions of this chapter. The Secretary may promulgate any

interim final rules as the Secretary determines are appropriate to carry out this chapter."

(b) CLERICAL AMENDMENT.—The table of subtitles of such Code is amended by adding at the end the following new item:

"Subtitle K. Group health plan portability, access, and renewability requirements."

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(c) EFFECTIVE DATE.—

(d) IN GENERAL.—The amendments made by this section

shall apply to plan years beginning after June 30, 1997

(2) DETERMINATION OF CREDITABLE COVERAGE.—

(A) PERIOD OF COVERAGE.—

(i) IN GENERAL.—Subject to clause (ii), no period

before July 1, 1996, shall be taken into account

under chapter 100 of the Internal Revenue Code of 1986

(as added by this section) in determining creditable coverage.